

As a below named inventor, I hereby declare:
that my residence, post office address and citizenship are as stated below
next to my name; #3

that I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the invention entitled: **METHOD OF PRODUCING EDIBLE CELLULOSIC FILMS**, the specification of which [check one(s) applicable]

was filed March 28, 2001 as United States Patent Application No. 09/819,465; and was amended by Amendment filed _____ (if applicable); or is attached to this Declaration, Power of Attorney and Power to Inspect;

that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above; and

that I acknowledge my duty to disclose information which is material to the examination of this application in accordance with Rule 56(a) [37 C.F.R. §1.56(a)].

CLAIM UNDER 35 U.S.C. §119(e): I hereby claim the benefit under 35 U.S.C. §119(e) of any United States provisional application(s) listed below:

<u>Provisional Appln No.</u>	<u>Filing Date</u>	<u>Day/Mo/Year</u>
60/192,666	March 28, 2000	28-03-2000

POWER OF ATTORNEY: As inventor, I hereby appoint **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, Pennsylvania, and the following individual(s) as my attorneys or agents with full power of substitution to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith: **Patrick J. Hagan, Reg. No. 27,643** and **Kathleen D. Rigaut, Ph.D., Reg. 43,047.**

POWER TO INSPECT: I hereby give **DANN, DORFMAN, HERRELL AND SKILLMAN, P.C.** of Philadelphia, Pennsylvania or its duly accredited representatives power to inspect and obtain copies of the papers on file relating to this application.

SEND CORRESPONDENCE TO: **CUSTOMER NUMBER 000110**

DIRECT INQUIRIES TO: Telephone: (215) 563-4100
Facsimile: (215) 563-4044

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

SOLE OR FIRST JOINT INVENTOR

SECOND JOINT INVENTOR (IF ANY)

Full Name Michael K. Weibel
First Middle Last

Signature Michael K. Weibel

Date June 1, 2001

Residence West Redding CT
City State or Country

Citizenship USA

Post Office Address:

120 GALLOW'S HILL RD.
Street Address

REDDING, CT 06896
City State or Country Zip Code

Full Name _____
First Middle Last

Signature _____

Date _____

Residence _____
City State or Country

Citizenship _____

Post Office Address:

Street Address _____

City _____ State or Country _____ Zip Code _____